puerperal convulsions to be one of apoplexy, only that we have added to the apoplectic phenomena violent spasmodic contractions. Eclampsia may arise from defective elimination of carbonic acid through the lungs and of bile from the blood. It may also be produced by anæmia, as when the patient has suffered from profuse loss of blood; by conditions of the blood, in which its constituents are chemically and histologically changed, as in hydræmia, leukæmia, and hyperinosis. "Mineral, animal, and vegetable poisons, such as preparations of lead, strychnine, conium maculatum, cicuta aquatica, œnanthe crocata, etc., inhalation of carbonic acid and carbonic oxide have the power of producing conditions similar to eclampsia." Thus, we perceive, as Dr. Braun says, that under the appellation of "Eclampsia," several pathological processes have hitherto been comprehended, which do not even present an identical series of symptoms, and which have only this in common, that there exist tonic, and especially clonic spasms, along with loss of sensibility, in which the life of the patient is ordinarily in very great danger, and which very soon come to a termination. There is now a numerous class of observers in the profession who would confine the term eclampsia puerperalis exclusively, or almost so, to those cases of convulsion depending upon uræmic poisoning. Among these, Prof. Braun holds a high position.

The first person to draw the attention of physicians to the frequency of albumine in the urine of pregnant women, was the celebrated M. Rayer, and he was the first to attempt the determination of the effects which such condition produced on the mother and infant. He has been followed in his investigations by Drs. Lever and Cahen, by M. M. Devilliers, Reynaud, Blot, Goubeyre, Frerich, Schotten, and Weiger, and the result has been that their researches have shed much light on this obscure point in puerperal pathology. According to M. Rayer, hyperæmia of the kidneys is produced by the developed uterus pressing on the left renal vein. The cause continuing, engorgement eventually terminates in inflammation, "and thus," says Cazeau, "we can explain the possible effect of the extreme distension of the uterus, whether due to dropsy of the amnios or to the presence of several children. 2. Of a first pregnancy, in which the uterus is strongly applied to the posterior walls of the abdomen, in consequence of the resistance of the abdominal parieties (seven-eighths of the cases of eclampsia have occurred in primiparous women). 3. Why, according to the observations of M. P. Dubois, rachitis is often connected with eclampsia, since, in women affected with this disease, the small stature and limited space within the abdominal enclosure, obstruct the developement of the uterus, which, by reacting in its turn upon the surrounding parts, forms a greater mechanical obstacle to the regular